FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

SEC Mall Processing Section

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FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1426713				
OMB A	PPROVAL			
OMB Numbe	r: 3235-0076			
Expires: A	pril 30,2008 erage burden			
Estimated av	erage burden			
1	16.00			

SEC USE ONLY					
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Washington, DC UNIFORM LIMITED OFFERING EXEMINATED OFFERING EXEMINATED (check if this is an amendment and name has changed, and indicate change.)	PTION
FRACTAL MARKET FUND, L.P. Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) FRACTAL MARKET FUND, L.P.	08024505
Address of Executive Offices (Number and Street, City, State, Zip Code) 4959 HAIGHT TERRACE, SAN DIEGO CA 92123	Telephone Number (Including Area Code) (858) 740-4398
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
PRIVATE INVESTMENT COMPANY MAKING INVESTMENTS IN AND TRADING OF LISTS SECURITIES, AND INITIAL PUBLIC OFFERINGS.	ED SECURITIES, OVER-THE-COUNTER
	PROCESSED
business trust limited partnership, to be formed	FEB 1 3 2008
Actual or Estimated Date of Incorporation or Organization: O 6 O 7 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated THOMSON

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) **THOMAS ZHENG** Business or Residence Address (Number and Street, City, State, Zip Code) 4959 HAIGHT TERRACE, SAN DIEGO CA 92123 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: General and/or Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Beneficial Owner Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City. State, Zip Code)

B. INFORMATION ABOUT OFFERING													
_	Line tha	iccupt cold	or does th	e iconer in	- tend to sel	l to non-ac	credited in	ovestors in	this offeri	no?		Yes	No K
ι.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
2.	2 What is the minimum investment that will be accepted from any individual?					ver	_{\$_250}	0.000.00					
							0	i gene	eral pa	artner		Yes	No
3.			permit joint									X	
4.	commissing of states or states a broker	sion or sim on to be lis . list the na or dealer,	ion request ilar remune ted is an ass ume of the b you may so	ration for section for section for the rocker or de cet forth the	olicitation rson or age aler. If mo	of purchase nt of a brok re than five	rs in conne er or deale: (5) person	ction with registered s to be liste	sales of sec with the S ed are asso	urities in tl EC and/or	ne offering. with a state		
Ful	II Name (1	_ast name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)			-			
Na	me of Ass	sociated Br	oker or De	aler									
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers						
	(Check	"All States	or check	individual	States)					••••••		☐ Al	1 States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	ĦĪ	ID
	TL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM) [UT]	NY VT	NC VA	\overline{WA}	OH WV	OK WI	OR WY	PA PR
_													
Fu	Il Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)					_	
Na	me of As	sociated B	roker or De	aler									
Sta	ates in Wi	ich Persor	Listed Has	s Solicited	or Intends	to Solicit l	Purchasers						
	(Check	"All State:	s" or check	individual	States)		***************************************	· · · · · · · · · · · · · · · · · · ·	******	***************************************	,,,,	☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	IH	ID
	IL	[IN]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Fu	Full Name (Last name first, if individual)												
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	ÏН	ĪD]
	IL NOT	IN	[]A	KS	KY	LA NM	ME	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	MT RI	NE SC	NV SD	NH TN	NJ TX	UT	NY VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1,	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	k	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	c 0.00	s 0.00
	Equity		§ 0.00
	Common Preferred		<u> </u>
	Convertible Securities (including warrants)	€ 0.00	0.00 \$
	Partnership Interests	\$ 100 000 000 00	
			\$
	Other (Specify) Total	. 5	*
		. <u>\$</u>	3_100,000.00
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	e	
		Number Investors	Aggregate Dollar Amount of Purchases \$ 105,000.00
	Accredited Investors	·	\$ 0.00 \$ 0.00
	Non-accredited Investors		s 105,000.00
	Total (for filings under Rule 504 only)	. 2	\$_100,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security 0	Sold § 0.00
	Rule 505	· 	<u> </u>
	Regulation A	· <u> </u>	\$_0.00 \$_0.00
	Rule 504		
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate.	r.	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$ 1,000.00
	Legal Fees		\$_8,500.00
	Accounting Fees		\$_0.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		§ 0.00
	Other Expenses (identify) Entity Formations		§_378.00
	Total		\$ 9,878.00

	C. OFFERING PRICE, N	IUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	and total expenses furnished in response to Part 6	offering price given in response to Part C — Question I C — Question 4.a. This difference is the "adjusted gross	5	99,990,122.00
5.	each of the purposes shown. If the amount for	is proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and tall of the payments listed must equal the adjusted gross. Part C — Question 4.b above.	i	
			Payments to	
			Officers,	Dougrants to
			Directors, & Affiliates	Payments to Others
	Salaries and fees			5.500.00
	Purchase rental or leasing and installation of	machinery		_
	and equipment		\$_0.00	. D\$ 0.00
	Construction or leasing of plant buildings and	d facilities	\$ 0.00	\$ 0.00
	Acquisition of other businesses (including the	e value of securities involved in this		
	issuer pursuant to a merger)		□ \$. L3
	Repayment of indebtedness		□ \$. U \$ 0.00
	Working capital		· [_ \$	\$ 0.00
			<u> </u>	. S 1,000.00
	Entity Formations		\$	\$_378.00
	Total Payments Listed (column totals added)		\$ <u>_9</u>	878.00
_				
sig	nature constitutes an undertaking by the issuer t	by the undersigned duly authorized person. If this notion furnish to the U.S. Securities and Exchange Commin-accredited investor pursuant to paragraph (b)(2) of	ce is filed under Ru ission, upon writte	ale 505, the following on request of its staff
Iss	uer (Print or Type)	Signature	Date	
FI	RACTAL MARKET FUND, L.P.	A	12-21	-07
N'a	me of Signer (Print or Type)	Title of Signer (Print or Type)		
	OMAS ZHENG	MANAGER, FRACTAL MARKET FUND MA		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Provisions of such rule?

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) FRACTAL MARKET FUND, L.P.	Signature	Date 12-21-07		
Name (Print or Type)	Title (Print or Type)			
THOMAS ZHENG	MANAGER, FRACTAL MARKE	MANAGER, FRACTAL MARKET FUND MANAGEMENT, LLC, GP		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or prince signatures.